

NEBRASKA DEPARTMENT OF AGRICULTURE BUREAU OF ANIMAL INDUSTRY DOG AND CAT ATTENDING VETERINARIAN CARE (Program of Veterinary Care for Commercial Breeders, Dealers, Boarding Kennels)	OFFICE USE ONLY <hr/> DATE RECEIVED
--	---

SECTION I. A PROGRAM OF VETERINARY CARE (PVC) HAS BEEN ESTABLISHED BETWEEN:	
A. LICENSEE/REGISTRANT	B. VETERINARIAN
1. NAME	1. NAME
2. BUSINESS NAME	2. CLINIC
3. LICENSE/REGISTRATION NUMBER	3. STATE LICENSE NUMBER
4. MAILING ADDRESS	4. BUSINESS ADDRESS
5. CITY, STATE AND ZIP CODE	5. CITY, STATE AND ZIP CODE
6. TELEPHONE (home) TELEPHONE (business)	6. TELEPHONE (business)

This is a form that may be used for the Attending Veterinarian Care. Also, this form may be used as a guideline for the written Program of Veterinary Care as required.


The attending veterinarian shall establish, maintain and supervise programs of disease control and prevention, pest and parasite control, pre-procedural care and post-procedural care, nutrition, euthanasia and adequate veterinary care for all animals on the premises of the licensee/registrant. A written program of adequate veterinary care between the licensee/registrant and the doctor of veterinary medicine shall be established and reviewed on an annual basis. Such programs must include regularly scheduled visits to the premises by the veterinarian. Scheduled visits are required to monitor animal health and husbandry.

Pages or blocks which do not apply to the facility should be marked N/A. If space provided is not adequate for a specific topic, additional sheets may be added. Please indicate Section and Item Number.

I have read and completed this Program of Veterinary Care, and understand my responsibilities.

Regularly scheduled visits by the veterinarian will occur at the following frequency:

_____(minimum annual).

C. SIGNATURE of LICENSEE/REGISTRANT 	DATE
D. SIGNATURE OF VETERINARIAN	DATE